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	CLAIMS AS FILES - PART I (Column 1) (Column 2)						SWIT ENJELS		OR		R TIWN ENTITY
1	FOR	t/u	æer fre	0 .	NUBER EXTRA		RATE	FEE		RATE	FEE
L	BASIC FEE (37 CFR 1.16(a))							s	√o'n		1
Ŀ	101AL CLABIS 37 CFR 1.16(c))		mines	20 =			x 5	,	OR	x 5	V
L	NDEPENDENT 6 37 CFR 1.16(b))	LLOSS	minus	3 : •		$ begin{array}{c} & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & \\ & & & \\ &$	٠.		OR	X:	1
Ŀ	MULTIPLE DEPENDENT CLAIM PRESENT (2) OFR 1.16(d))						+1		OR		
.	' If the difference in column 1 is less than zero, enlar "O" in column 2.						TOTAL		OR	IOTAL	
	20	CLAIMS AS A	MENDE	O ~ PART II							
_	ONFO (Column 1) (Column 2) (Column 3)						SMALL E	ENTITY	OR		RTHAN
-	7	CLARAS	T	HIGHEST	<u> </u>	1					ENTITY
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U V	Total (37 CFR 1.15(cf)	AMENDMENT	Minus	PAID FOR	•		x s=	PEC	OR	X 5 =	FEE
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8	11.11	(Cotumn 1) CLAIMS		(Column :	2) (Column 3) PRESENT	ſ		ADQI	1	CATE	ADDI:
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A	FIRST PRESENTATION OF MULTIPLE DEPONDENT QUAM. (37 CFR 1.16(d))						+5 =		OR	+5 =	765
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		(Column 1)		(Calumn 2)	(Column 3)					•	7
اد		CLAMS REMAINING		HIGHEST	PRESENT	Γ	RATE	ADD1	. [	RATE	ADDI-
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	Independent (27 OFR 1.14(b))	•	Minus	•••	•		x \$=		OR	x \$=	
ì٢	FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))						+ 5=		OR	+ \$=	
1										TOTAL	

"If the entry in column 1 is less than the entry in column 2, write "0" in equipm 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is astimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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